

BEST AVAILABLE COPY

CLAIMS ONLY

Application Number

10/664,927

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend				
1	/		/		/					
2				/		/				
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Total Indep	3		5		5					
Total Depend	17	←	15	←	15	←				
Total Claims	20		20		20					